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TO	Mail Stop Amendment
COMPANY	U.S. Patent & Trademark Office
FAX NUMBER	15712738300
FROM	Christopher Spletzer
DATE	2006-01-23 19:09:04 GMT
RE	Application No. 10/775,828

## COVER MESSAGE

ATTY. DOCKET NO.: KNS-121US  
TITLE OF APPLN.: TEST PIN BACK SURFACE IN PROBE  
APPARATUS FOR LOW WEAR MULTIPLE  
CONTACTING WITH CONDUCTIVE  
ELASTOMER  
FILING DATE: February 9, 2004  
ART UNIT: 2829  
FIRST INVENTOR: Jiachun Zhou et al.  
CONF. NO.: 8171

TITLE OF DOCUMENT (and List of Attachments):  
Transmittal, Petition for Extension of Time in  
duplciate; Amendment (10 pgs.); POA and Statement Under  
37 CFR 3.73(b)

Total Number of Pages: 16 (including this form)

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PTO/SB/21 (09-04)

Approved for use through 7/31/2006. OMB 0651-0031

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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	10/775,828
	Filing Date	February 9, 2004
	First Named Inventor	Jiachun Zhou et al.
	Art Unit	2829
	Examiner Name	Russell Marc Kobert
	Attorney Docket No.	KNS-121US
Total Number of Pages in This Submission 15		

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Statement Under 37 CFR 3.73(b)
Remarks:		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT			
Firm/Company Name	Kulicke and Soffa Industries, Inc.		
Signature	<i>Christopher M. Spletzer, Sr.</i>		
Printed Name	Christopher M. Spletzer, Sr.		
Date	January 23, 2006	Registration No.	52,240

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Signature	<i>Tonya M. Berger</i>		
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